UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT	FORM B	JUN D 8 2010.
Period covered: January 1, 2009 - Jna 7, 2010	For use by candidates and new employees	
		CAGISI ATIVE RESOURCE CENTIG
Name: MATThew S. Campbell Daytime Telephone:		2010 JUN 16 PM 12: 43
Name. ///// NEW S. CAMP DELLE Bayin	ne reiepnone:	OFFICE CONTROL OF SAME
		(Office Use Only)
Filer Candidate for the State: House of Representatives State: Date: Filer Date: District: State: District: Dist	e of Check if ction: June 6, 2010 Property	A \$200 penalty shall be assessed
Status New officer or employee Employing Office:	, when the same is a same in the same in the same is a same in the same in the same is a same in the	against anybody who files more than 30 days late.
In all sections, please type or print clearly in black ink.		
PRELIMINARY INFORMATION — ANSWER EACH OF TH	ESE QUESTIONS	
Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes No If yes, complete and attach Schedule I. No No No No No No No No No N	IV. Did you hold any reportable positions on or boof filing in the current calendar year or in the price If yes, complete and attach Schedule IV.	pefore the date or two years? Yes No
II. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes No figure yes, complete and attach Schedule II.	V. Did you have any reportable agreement or an with an outside entity? If yes, complete and attach Schedule V.	rangement Yes No
III. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule III.	VI. Did you receive compensation of more than a single source in the two prior years? If yes, complete and attach Schedule VI.	\$5,000 from Yes No
Each question in this part must be answered and the	e appropriate schedule attached for	each "Vas" response
question with a part most so different and the	- appropriate seriedale attached for	each les response.
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFO	PRMATION — ANSWER EACH C	F THESE QUESTIONS
TRUSTS —Details regarding "Qualified Blind Trusts" approved by the Committee on S need not be disclosed. Have you excluded from this report details of such a trust benepage 8.)	tandards of Official Conduct and certain other "e efiting you, your spouse, or a dependent child? (excepted trusts" (See Instructions, Yes No
EXEMPTION —Have you excluded from this report any other assets, "unearned" inco because they meet all three tests for exemption? Do not answer "yes" unless you have Conduct.	ome, transactions, or liabilities of a spouse or de e first consulted with the Committee on Standard	pendent child ds of Official Yes No

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BLOCK A BLOCK B BLOCK C BLOCK D Type of Income Asset and/or Income Source Value of Asset **Amount of Income** Indicate value of asset at close Check all columns that apply. For Identify (a) each asset held for investment or For retirement plans or accounts that do not retirement plans or accounts that production of income with a fair market value of reporting year. If you use a allow you to choose specific investments, you do not allow you to choose specifexceeding \$1,000 at the end of the reporting valuation method other than fair may write "NA" for income. For all other ic investments, you may write "NA." period, and (b) any other asset or sources of market value, please specify the assets, including all IRAs, indicate the cate-For all other assets including all income which generated more than \$200 in method used. "unearned" income during the year. For rental IRAs, indicate the type of income gory of income by checking the appropriate by checking the appropriate box property or land, provide a complete address. box below. Dividends and interest, even if If an asset was sold during the Provide full names of stocks and mutual funds below. Dividends and interest, reinvested, should be listed as income. reporting year and is included even if reinvested, should be (do not use ticker symbols). For all IRAs and Check "None" if no income was earned or only because it generated other retirement plans (such as 401(k) plans) listed as income. Check "None" if generated. income, the value should be that are self directed (i.e., plans in which you asset did not generate any income "None." have the power, even if not exercised, to select during calendar year. the specific investments), provide the value and income information on each asset in the ABCDEFGHIJKL account that exceeds the reporting threshold. **Current Year Preceding Year** For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, ŏ state the name of the business, the nature of Specify: For Example, Partnership Income its activities, and its geographic location in Block A. For additional information, see the instruction booklet. \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$50,000,000 CAPITAL GAINS EXCEPTED/BLIND TRUST Exclude: Your personal residence(s) (unless \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000 \$250,000 \$500,000 \$1,000,000 there is rental income); any debt owed to you Other Type of income by your spouse, or by you or your spouse's \$50,001 - \$100,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$201 – \$1,000 \$1,001 – \$2,500 \$2,501 – \$5,000 \$5,001 – \$15,000 \$15,001 - \$50,000 child, parent, or sibling, any deposits totalling Over \$50,000,000 Over \$5,000,000 \$5,000 or less in personal savings accounts; \$201 - \$1,000 DIVIDENDS any financial interest in or income derived from \$100,001 - \$ \$250,001 - \$ \$500,001 - 8 U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. X Χ SP Mega Corp. Stock Indefinite Royalties DC, Examples: Simon & Schuster 1st Bank of Paducah, KY accounts 12000 Market Start \$ 155 Rism, V4 Scottrade, Rollover JRA ACC! CTDBQ"

SCHEDULE V—AGREEMENTS	Name Matthew
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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1/1/2001	KPM6 + Matthew Complet	Pensin
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SCHEDULE VI—COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of such compensation received by you or your business affiliation for services provided directly by you during the *two* prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any nonprofit organization if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. Government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule I.

Source (Name and Address) Brief Description of Duties		Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting services
		
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